The everlasting story of malignant pleural mesothelioma: where do we stand?

Malignant pleural mesothelioma (MPM) is still considered a relatively rare tumour, although Europe is at the peak of an epidemic of malignant pleural mesothelioma and the burden of disease is likely to continue rising in the large areas of the world where asbestos remains unregulated. Patients with mesothelioma present with thoracic symptoms and radiological changes so respiratory physicians take a leading role in diagnosis and management.

Unfortunately, MPM is resistant to treatment with traditional anti-cancer treatments (surgery, chemotherapy and radiotherapy) alone, even if some recent progress has been made with and treating patients with multimodal treatment, which involves various combinations of chemotherapy, surgery and radiotherapy. However, the lack of standardisation or adherence to guidelines during diagnosis, treatment, and surveillance of cancer patients is one of the significant barriers to providing high-quality cancer care.

Whenever the question arises "Might an operation help me?", two responses can and should be given. The first is that there is doubt about whether there is any survival or symptomatic benefit from surgery, but we know that there is harm. The second is that there are on-going studies, including two randomised trials, which patients should be informed about. The belief that the modest survival times reported after radical surgery, whether alone or as part of multimodal therapy, are longer than without surgery relies on data from highly selected, free, retrospectively analysed case series. The only randomised study, the Mesothelioma, and Radical Surgery (MARS) trial showed no benefit. Consequently, a modern approach to MPM requires a total care of the patient, by a network of healthcare facilities and expert professionals, working in an integrated manner to achieve better results at any stage of the disease's course. From prevention to the supportive care, from the diagnosis to the treatment, the goal of any professional in charge is offering to the patient, and his relatives, the best care options, with a continuous updating of their knowledge.

The 12th–13th May 2017, in Viareggio (Italy), we arranged a conference with the purpose mentioned above and goal: to treat the MPM from different points of view in a multidisciplinary context, starting from the history of this disease, via state of the art until the future perspectives. It was a monothematic event with a view on epidemiological and forensic aspects, the medical surveillance, biological, diagnostic and therapeutic standards besides the ongoing researches involving the various specialists who oversee this rare cancer; which has substantial costs regarding social health. The papers, which are collected in this thematic issue of the *Journal of Thoracic Disease*, summarise the most significative relations of the Congress both as review and as original articles.

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